

# Form CPF M 102: Campaign Finance Report Municipal Form APR

Office of Campaign and Political Finance

APR - 8 2022

CITY CLERKS OFFICE

of Massachuseus	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	1/1/2021 Ending Date: 12/31/2021
Type of Report: (Check one)	
8th day preceding preliminary 8th day preceding elec	ction 30 day after election year-end report dissolution
Candidate Full Name (if applicable)  Allor gl Uy Juncell  Office Sought and District	William Dewight Comm Committee Name ) Alda Lew S  Name of Committee Treasurer
Residential Address	39 Mystle St. Nor thampt Committee Maining Address
E-mail:  Phone # (optional):	E-mail:  Phone # (optional):
SUMMARY BA	LANCE INFORMATION:
Line 1: Ending Balance from previous rep	226.64
Line 2: Total receipts this period (page 3,	line 11)
Line 3: Subtotal (line 1 plus line 2)	226.64
Line 4: Total expenditures this period (page	ge 5, line 14) 226.64
Line 5: Ending Balance (line 3 minus line	4)
Line 6: Total in-kind contributions this per	riod (page 6)
Line 7: Total (all) outstanding liabilities (p	D ( ) N
Line 8: Name of bank(s) used:	lorence Savings Ball
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, activity, including all contributions, loans, receipts, expenditures, disbursement finance activity of all persons acting under the authority or on behalf of this con Signed under the penalties of perjury:	to the best of my knowledge and belief, a true and complete statement of all campaign finance is, in-kind contributions and liabilities for this reporting period and represents the campaign minittee in accordance with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date: 4/8/22
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (c	check 1 box only)
	it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance nittee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, is reporting period that are not otherwise disclosed in this report.
finance activity, including contributions, loans, receipts, expenditures, disb	it is, to the best of my knowledge and belief, a true and complete statement of all campaign bursements, in-kind contributions and liabilities for this reporting period and represents the ehalf of this candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Candidate's signature) Date: 4.8.22

#### **SCHEDULE A: RECEIPTS**

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	(u.p.u.pottour naving requireu)		(101 1011111111111111111111111111111111
ine 9: Total Receip	ots over \$50 (or listed above)		
ine 10: Total Recei	pts \$50 and under* (not listed above)		
ine 11. TOTAL R	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

## **SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
ine 9: Total Receip	ots over \$50 (or listed above)		
ine 10: Total Recei	pts \$50 and under* (not listed above)		
ine 11: TOTAL R	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

#### **SCHEDULE B: EXPENDITURES**

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
4)1	City of Northam.	210 Main of Morthampton	Donation	226.64
	7. 0			
		Line 12: Total Expenditures ov	ver \$50 (or listed shove)	770.101
		Line 13: Total Expenditures \$50		276.64
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	226.6

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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## **SCHEDULE B: EXPENDITURES (continued)**

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
		Line 12: Evnanditures	c \$50 (or listed shove)	
		Line 12: Expenditures over	. 450 (OI fisted above)	
		Line 13: Expenditures \$50 and under* (not listed above)		
	Enter on page 1, line 4	T. 44 TOTAL DYDDN	DITURES IN THE PERIOD	

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

### SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
				,
	1			
		Line 15: In-Kind Contribution	s over \$50 (or listed above)	
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line $6 \rightarrow$	6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS		

<sup>\*</sup> If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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## **SCHEDULE D: LIABILITIES**

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
	10 m			
	1			
	Enter on many 1 15 - 7	Line 18: TOTAL OUTSTANI	DINC LIADII ITIES (ALL)	

I forgive the \$13 liability from the Committee to Elect Bill Dwight.

Sincerely,

William (Bilf) A. Scher

145 State Street

Northampton, MA 01060

PAMELA L. POWERS
Notary Public
Commonwealth of Massachusetts
My Commission Expires
May 17, 2024

